

APR 04 2019

1904059089900001

US BANK/FCC

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDINGFEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE
FORM 159Approved by OMB
3064-01589
Page No. 1 of 2

(1) LOCKBOX # 879089		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) WAGY, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$725.00	
(4) STREET ADDRESS LINE NO. 1 205 Sheriff Huskey Road			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Forest City		(7) STATE NC	(8) ZIP CODE 28043
(9) DAYTIME TELEPHONE NUMBER (include area code) 8282459887		(10) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0007689771		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE. IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME WAGY, Inc.			
(14) STREET ADDRESS LINE NO. 1 205 Sheriff Huskey Road			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY Forest City		(17) STATE NC	(18) ZIP CODE 28043
(19) DAYTIME TELEPHONE NUMBER (include area code) 8282459887		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0007689771		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID WAGY	(24A) PAYMENT TYPE CODE MMR	(25A) QUANTITY 1	
(23B) FEE DUE FOR (PTC) \$725.00	(27A) TOTAL FEE \$725.00	FCC USE ONLY	
(28A) FCC CODE 1 70700		(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT I, <u>Marjorie Huskey</u> , certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.			
SIGNATURE <u>Marjorie Huskey</u>		DATE <u>3-22-19</u>	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD <input type="checkbox"/> VISA <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/>			
AC			
I her.			
SIGN/			
PAID BY CREDIT CARD			

JULY 2003

US BANK/FCC
MAR 2 / 2019

U S BANK CONFIDENTIAL

FOR
FCC
USE
ONLY

FCC 302-AM
APPLICATION FOR AM
BROADCAST STATION LICENSE

(Please read instructions before filling out form.)

FOR COMMISSION USE ONLY

FILE NO.

BL-20190404AAU

SECTION I - APPLICANT FEE INFORMATION

1. PAYOR NAME (Last, First, Middle Initial)

WAGY, Inc.

MAILING ADDRESS (Line 1) (Maximum 35 characters)

205 Sheriff Huskey Road

MAILING ADDRESS (Line 2) (Maximum 35 characters)

CITY

Forest City

STATE OR COUNTRY (if foreign address)

NC

ZIP CODE

28043

TELEPHONE NUMBER (include area code)

8282459887

CALL LETTERS

WAGY

OTHER FCC IDENTIFIER (if applicable)

2. A. Is a fee submitted with this application?



Yes



No

B. If No, indicate reason for fee exemption (see 47 C.F.R. Section



Governmental Entity



Noncommercial educational licensee



Other (Please explain):

C. If Yes, provide the following information:

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter fee amount due in Column (C).

(A)

FEE TYPE CODE		
M	M	R

(B)

FEE MULTIPLE			
0	0	0	1

(C)

FEE DUE FOR FEE TYPE CODE IN COLUMN (A)
\$ 725.00

FOR FCC USE ONLY

To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)

--	--	--

(B)

0	0	0	1
---	---	---	---

(C)

\$

FOR FCC USE ONLY

ADD ALL AMOUNTS SHOWN IN COLUMN C,
AND ENTER THE TOTAL HERE.
THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED
REMITTANCE.

TOTAL AMOUNT
REMITTED WITH THIS
APPLICATION

\$

FOR FCC USE ONLY

SECTION II - APPLICANT INFORMATION		
1. NAME OF APPLICANT WAGY, Inc.		
MAILING ADDRESS 205 Sheriff Huskey Road		
CITY Forest City	STATE NC	ZIP CODE 28043

2. This application is for:

- ☒ Commercial
 ☐ Noncommercial
☐ AM Directional
 ☒ AM Non-Directional

Call letters WAGY	Community of License Forest City	Construction Permit File No. BP-20181218AAG	Modification of Construction Permit File No(s).	Expiration Date of Last Construction Permit
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3. Is the station now operating pursuant to automatic program test authority in accordance with 47 C.F.R. Section 73.1620?

☒ Yes ☐ No

If No, explain in an Exhibit.

Exhibit No.

4. Have all the terms, conditions, and obligations set forth in the above described construction permit been fully met?

☒ Yes ☐ No

If No, state exceptions in an Exhibit.

Exhibit No.

5. Apart from the changes already reported, has any cause or circumstance arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect?

☐ Yes ☒ No

If Yes, explain in an Exhibit.

Exhibit No.

6. Has the permittee filed its Ownership Report (FCC Form 323) or ownership certification in accordance with 47 C.F.R. Section 73.3615(b)?

☒ Yes ☐ No

☐ Does not apply

If No, explain in an Exhibit.

Exhibit No.

7. Has an adverse finding been made or an adverse final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?

☐ Yes ☒ No

If the answer is Yes, attach as an Exhibit a full disclosure of the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.

Exhibit No.

8. Does the applicant, or any party to the application, have a petition on file to migrate to the expanded band (1605-1705 kHz) or a permit or license either in the existing band or expanded band that is held in combination (pursuant to the 5 year holding period allowed) with the AM facility proposed to be modified herein?

☐ Yes ☒ No

If Yes, provide particulars as an Exhibit.

Exhibit No.

The APPLICANT hereby waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because use of the same, whether by license or otherwise, and requests and authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended).

The APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations and that all the exhibits are a material part hereof and are incorporated herein as set out in full in

CERTIFICATION

1. By checking Yes, the applicant certifies, that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, or, in the case of a non-individual applicant (e.g., corporation, partnership or other unincorporated association), no party to the application is subject to a denial of federal benefits that includes FCC benefits pursuant to that section. For the definition of a "party" for these purposes, see 47 C.F.R. Section 1.2002(b).

☒ Yes ☐ No

2. I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Name Marjorie Huskey	Signature <i>Marjorie Huskey</i>	
Title President	Date 3-22-19	Telephone Number 8282459887

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The solicitation of personal information requested in this application is authorized by the Communications Act of 1934, as amended. The Commission will use the information provided in this form to determine whether grant of the application is in the public interest. In reaching that determination or for law enforcement purposes, it may become necessary to refer personal information contained in this form to another government agency. In addition, all information provided in this form will be available for public inspection. If information requested on the form is not provided, the application may be returned without action having been taken upon it or its processing may be delayed while a request is made to provide the missing information. Your response is required to obtain the requested authorization.

Public reporting burden for this collection of information is estimated to average 639 hours and 53 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, can be sent to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0627), Washington D C 20554. Do NOT send completed forms to this address.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507.

FCC 302-AM (Page 3)
August 1995

SECTION III - LICENSE APPLICATION ENGINEERING DATA

Name of Applicant
WAGY, Inc.

PURPOSE OF AUTHORIZATION APPLIED FOR: (check one)



Station License



Direct Measurement of Power

1. Facilities authorized in construction permit					
Call Sign WAGY	File No. of Construction Permit (if applicable) BP-20181218AAG	Frequency (kHz) 1320	Hours of Operation Unlimited	Power in kilowatts	
				Night 0.03	Day 1.0*
2. Station location					
State North Carolina			City or Town Forest City		
3. Transmitter location					
State NC	County Rutherford	City or Town Forest City		Street address (or other identification) Old Wagy Rd & Woodburn Dr	
4. Main studio location					
State NC	County Rutherford	City or Town Forest City		Street address (or other identification) 129 N. Powell St., #223	
5. Remote control point location (specify only if authorized directional antenna)					
State NC	County Rutherford	City or Town Forest City		Street address (or other identification) 129 N. Powell St., #223	

6. Has type-approved stereo generating equipment been installed?



Yes



No

7. Does the sampling system meet the requirements of 47 C.F.R. Section 73.68?



Yes



No



Not Applicable

Attach as an Exhibit a detailed description of the sampling system as installed.

Exhibit No.
N/A

8. Operating constants:					
RF common point or antenna current (in amperes) without modulation for night system 0.652			RF common point or antenna current (in amperes) without modulation for day system 3.541 (*Operating power is 0.884 W, see Statement A)		
Measured antenna or common point resistance (In ohms) at operating frequency Night 70.5 Day 70.5			Measured antenna or common point reactance (in ohms) at operating frequency Night +103.5 Day +103.5		
Antenna indications for directional operation					
Towers	Antenna monitor Phase reading(s) in degrees		Antenna monitor sample current ratio(s)		Antenna base currents
	Night	Day	Night	Day	Night Day
Does not apply - non DA station					
Manufacturer and type of antenna monitor: Does Not Apply					

SECTION III - Page 2

9. Description of antenna system ((f directional antenna is used, the information requested below should be given for each element of the array. Use separate sheets if necessary.)

Type Radiator Uniform Cross Section	Overall height in meters of radiator above base insulator, or above base, if grounded. 60.96	Overall height in meters above ground (without obstruction lighting) 61.9	Overall height in meters above ground (include obstruction lighting) 61.9	If antenna is either top loaded or sectionalized, describe fully in an Exhibit. Exhibit No. N/A
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Excitation



Series



Shunt

Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location.

North Latitude 35 ° 21 ' 16 "	West Longitude 81 ° 52 ' 46 "
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If not fully described above, attach as an Exhibit further details and dimensions including any other antenna mounted on tower and associated isolation circuits.

Exhibit No.
N/A

Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and dimensions of ground system.

Exhibit No.
N/A

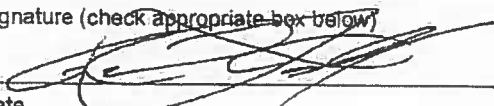
10. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit?

No difference

11. Give reasons for the change in antenna or common point resistance.

Removal of old directional towers, change to all 24 hour non-DA operation

I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief.

Name (Please Print or Type) Garrison C Cavell	Signature (check appropriate box below) 
Address (include ZIP Code) Cavell, Mertz & Associates, Inc. 7724 Donegan Drive Manassas, VA 20109	Date 03/15/2019
	Telephone No. (Include Area Code) (703) 392-9090



Technical Director



Registered Professional Engineer



Chief Operator



Technical Consultant



Other (specify)

Statement A
Technical Statement Supporting an Application for License
Prepared November 2018 for
WAGY, INC. FCC CP File Number BP-20181218AAG
WAGY(AM) Forest City, North Carolina (Facility ID 70700)
1320 kHz 1.0 kW-D 0.03 kW-N ND- U

This Statement is supplied on behalf of *WAGY, INC.*, licensee of Standard Broadcast Station WAGY, Forest City, North Carolina. It provides technical information in support of an *Application for License*, which has been prepared to cover FCC Construction Permit ("CP") Number BP-20181218AAG (granted February 22, 2019).

WAGY was previously authorized under License File Number BL-19810811AA as a Class B station operating on a frequency of 1320 kHz. Daytime operation was for a nominal 1 kW using a non-directional antenna, while a power of 0.5 kW was authorized during nighttime hours utilizing a directional antenna system. Under the CP cited above, authority was granted to make changes in the licensed WAGY nighttime operation as follows: 1) delete directional operation during nighttime hours (using a non-directional power of 0.03 kW), 2) change station class to Class D, and 3) correct station coordinates. No other changes were proposed. Now that construction has been completed as authorized under the CP, this application is being tendered for a new station license.

Operating Power – Response to FCC Form 302-AM, Section III, Paragraph 8

The licensed non-directional daytime theoretical RMS efficiency was restricted to 282 mV/m/kW, under BP-19800228AM and BL-19810811AA. *Achieving this restriction was accomplished by limiting the daytime antenna input power to 884 Watts.* Since no changes were requested in daytime theoretical efficiency in the application underlying CP, the previously authorized efficiency was carried forward in the Application for CP proposal as 282 mV/m/kW, and is also specified in the now granted CP

As such, in order to continue to meet the specified daytime RMS limitation, the daytime antenna input power will be reduced, as before, to an operating power of 884 Watts to ensure that the specified RMS limitation is maintained. The following table summarizes this information contained in this application.

Operating Mode	Authorized RMS (mV/m/kW at 1 km)	Nominal Power	Operating Power	Antenna Resistance	Antenna Current
Daytime	282	1.0 kW	0.884 kW	70.5	3.541 A
Nighttime	310.067	0.030 kW	0.030 kW	70.5	0.652 A

CP Special Operating Conditions or Restrictions ("Conditions")

All 3 CP Conditions have been satisfied. 1) A type-accepted transmitter is in use, 2) *WAGY, Inc.* will reduce power or cease operations as necessary to protect persons having access to the site and antenna tower from RF electromagnetic fields in excess of FCC guidelines, and 3) this material is part of an attachment to a covering FCC Form 302-AM, which is being filed prior to CP expiration.



1700 WELLS FARGO CAPITOL CENTER
150 FAYETTEVILLE STREET
RALEIGH, NC 27601

T 919.839.0300
F 919.839.0304
WWW.BROOKSPIERCE.COM

March 26, 2019

Via Overnight Delivery

Ms. Marlene Dortch, Secretary
Federal Communications Commission
c/o US Bank Lockbox 979089
1005 Convention Plaza
SL-MO-C2-GL
St. Louis, MO 63101

Attention: Audio Division

Re: WAGY(AM), Forest City, NC, FCC Form 302-AM;
Application for AM Broadcast Station License

Dear Ms. Dortch:

Transmitted herewith, on behalf of WAGY, Inc., licensee of WAGY(AM), Forest City, NC, are an original and two copies of an application for AM Broadcast Station License on Form 302-AM, along with a Form 159 for payment of the \$725 filing fee by credit card.

If any questions should arise during the course of your consideration of this application, it is respectfully requested that you communicate with this office.

Sincerely,

Elizabeth E. Spainhour
Counsel to WAGY, Inc.

Robinson, Tammy T

From: Roland Helvajian <Roland.Helvajian@fcc.gov>
Sent: Wednesday, April 03, 2019 11:37 AM
To: Robinson, Tammy T
Cc: Cheryl Collins; Octavia Purnell
Subject: [EXTERNAL] FW: WAGY - Returned Application
Attachments: 20190402151424869.pdf; WOBX - FILED Form 302-AM (January 2019) 4823-2885-1846 v.1.pdf

EXTERNAL email. Use caution when opening attachments or links from unknown senders.

Hi Tammy:

It was wonderful speaking to you yesterday. I received this inquiry from Brooks Pierce Law Firm regarding the submission of a faxed signature rather than an original one. This Law Firm does extensive business with the Commission, and every now and then, it is possible that they may submit a faxed signature with their paperwork. Please except this e-mail that authorizes U.S. Bank to process the attached Form 159 and other documents using a "faxed" signature rather than an original one. If you have any questions, please feel free to contact me at (202) 418-0444.

Thank you, Tammy

Roland Helvajian
Office of Managing Director, Revenues and Receivables Group

ORIGIN ID: S0PA CAROL HEVNER BROOKS PIERCE 150 FAYETTEVILLE STREET SUITE 1600 RALEIGH, NC 27601 UNITED STATES US		(919) 839-0300 SHIP DATE: 26MAR19 ACTWGT: 0.25 LB CAD: 10120339/IN/ET4100 BILL SENDER
TO FCC C/O U.S. BANK LOCKBOX 979089 1005 CONVENTION PLZ SL-MO-C2-GL ST. LOUIS MO 63101 (202) 418-0513 REF: 110267 00001 DEPT:		
565J146D323AD US BANK/FCC APR 27 2019		

NA CPSA MO-US 63101 STL	TRK# 0201 7748 0182 6159 WED - 27 MAR 3:00P STANDARD OVERNIGHT
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US BANK/FCC
APR 04 2019

After printing this label:

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
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3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

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